Self: Title:	
Title:	

## **Employee Final Comments - Please use after meeting with manager to review evaluation Final Comments**

**Employee** 

## CONFIDENTIALITY POLICY

It is the policy of Centra that all information is **confidential**, including, but not limited to patient diagnoses or courses of treatment, physician or other professional activities, financial or demographic information on any individual, Centra policies and procedures, employee information, or financial and operating statistics. This policy applies whether the information is obtained through verbal, written, or electronic means. The confidentiality protections extend to all Centra patients, students, donors, or clients. Information is to be accessed only on a "need to know" basis. The term "need to know" means the information is essential for performance of work responsibilities at Centra. Centra relies on employees' integrity to maintain this moral and legal obligation to patients and the organization. Any employee activity using Centra computer equipment or network resources may be audited, including Internet and email use. Any violation of this confidential information policy may lead to disciplinary or legal action against and/or dismissal of the employee.

By signing this form, I acknowledge the Centra Confidentiality policy has been reviewed with me as part of this appraisal process and I agree to remain in compliance.

My signature indicates that this Performance Appraisal has been reviewed with me.

Employee: KIMBERLY D HARTMAN K.H. (electronic signature for the evaluation of KIMBERLY D HARTMAN)

Date (d-MMM-yyyy): 19-Feb-2018 01:10 PM EST

Manager: STEPHANIE M EAST S.E. (electronic signature for the evaluation of KIMBERLY D HARTMAN)

Date (d-MMM-yyyy): 13-Mar-2018 07:57 AM EDT

Electronic confirmation: cb215b3c0fe2105d8163f9131a04744c

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**Employee** 

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My signature indicates that this Performance Appraisal has been reviewed with me.

Employee: KIMBERLY D HARTMAN K.H. (electronic signature for the evaluation of KIMBERLY D HARTMAN)

Date (d-MMM-yyyy): 1-Apr-2019 03:15 PM EDT

Manager: STEPHANIE M EAST S.E. (electronic signature for the evaluation of KIMBERLY D HARTMAN)

Date (d-MMM-yyyy): 17-Apr-2019 03:25 PM EDT

Electronic confirmation: b0162f4d471c54b8aeacb55c50cbcceb